



#8

PATENT
Attorney Docket No: 101.0056-09000
Customer Number 22882

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Gary K. Michelson, M.D.

Serial No: 09/754,733

Filed: January 4, 2001

For: ANTERIOR CERVICAL PLATING
SYSTEM, INSTRUMENTATION, AND
METHOD OF INSTALLATION

Art Unit: 3731

Examiner: Reip, D.

CERTIFICATE OF MAILING VIA U.S. EXPRESS MAIL"Express Mail" Mailing Label No. EL849519455US

Date of Deposit: September 7, 2001

Assistant Commissioner for Patents
Washington, D.C. 20231

Dear Sir:

I hereby certify that

- ☒ Transmittal letter (in duplicate) including three-month extension
- ☒ Reply to Restriction Requirement under 35 U.S.C. § 121
- ☒ Check in amount of \$ 890.00 for three-month extension of time fee
- ☒ Return postcard

are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service with sufficient postage under 37 C.F.R. § 1.10 on the date indicated above and are addressed to:

Assistant Commissioner for Patents
Washington, D.C. 20231.

Date: September 7, 2001

14500 Avion Parkway, Suite 300
Chantilly, VA 20151-1011
Telephone: 703-679-9300
Facsimile: 703-679-9303Rebecca K. Kennedy

Name of person mailing papers


SignatureRECEIVED
SEP 17 2001
TC 3700 MAIL ROOM



PTO-1083

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TC 3700 MAIL ROOMAssistant Commissioner for Patents
Washington, D.C. 20231

Dear Sir:

Transmitted herewith is a reply to the restriction requirement dated May 7, 2001 in the above-identified application.

☐ No additional fee is required.☒ Applicant hereby requests a three-month extension of time to respond to the above restriction requirement.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	101	-	81 **	0	LG=\$18 SM=\$9	\$ 0
INDEPENDENT CLAIMS FEE	2	-	0 ***	0	LG=\$80 SM=\$40	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$270 SMALL ENTITY FEE = \$135	\$ 0
TOTAL						\$ 0

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☒ A fee in the amount of \$ 890.00 to cover the three-month extension of time fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1066. **A copy of this sheet is enclosed.**
- ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
- ☒ Any patent application processing fees under 37 C.F.R. § 1.116

Respectfully submitted,
MARTIN & FERRARO LLPBy: Amedeo F. Ferraro
Registration No. 37,129
Attorney for Applicant(s)

Date: September 7, 2001

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